

## KCDDD FUNDING POLICY

### Reimbursement Policy and Instructions for Snohomish County Clients Receiving CDS Services in King County

Revised: July 1, 2005

In order for the King County Developmental Disabilities Division, (KCDDD), to reimburse an agency for CDS services for Snohomish County children, a designated Snohomish County revenue source must be identified in the agency's contract with KCDDD.

Providers serving Snohomish County CDS eligible children will bill KCDDD for reimbursement using the monthly excel Chris form. If your Chris file does not already contain a spreadsheet specifically for CDS services to Snohomish County children, please request that one be added to your Chris form by contacting Holly Bell by phone at 206-205-8693 or via email at [Holly.Bell@metrokc.gov](mailto:Holly.Bell@metrokc.gov), or Don Khamphilavong by phone at 206-296-2914 or via email at [Don.Khamphilavong@metrokc.gov](mailto:Don.Khamphilavong@metrokc.gov).

In order to standardize reimbursement rates amongst the various providers, KCDDD uses Snohomish County's fee structure. The following should be observed:

#### I. Snohomish County Human Services Department Unit Fees

Fill in your CHRIS form using the following unit fee schedule. Agencies may bill for quarter units (0.25, 0.5, 0.75 etc.) Please round to the nearest quarter unit.

UNIT (NAME)	TOTAL # OF UNITS*	RATE PER UNIT	FUNDING SOURCE	DEFINITION/NARRATIVE (if applicable)
Home/Community/ Individual	Open	\$37.50	DD/DSHS Contract	One staff hour with individual child/family at home or in a community setting or one hour of travel.
Center/Individual	Open	\$25.00	DD/DSHS Contract	One staff hour with individual child/family at Contractor's center.
Collaborative	Open	\$25.00	DD/DSHS Contract	One staff hour on behalf of individual child/family.
Center/Group	Open	\$18.00	DD/DSHS Contract	One staff hour with child, in group setting.

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Interpreter	Open	\$25.00	DD/DSHS Contract	One hour by interpreter in home, community, Contractor's center, or other setting on behalf of child/family.
*This is dependant on what is listed in the child's IFSP				

Definitions for these services are outlined below (as excerpted from the Snohomish County CDS contracts):

### *A. Home/Community-Based Individual Services*

Home/Community-Based Individual Services are defined as individual therapy/educational services provided to a child/family in the child's home or in a community setting. Community settings are natural environments where young children without disabilities commonly spend their time and participate in activities with other children, such as child care centers, preschools, play groups, etc.

1. A unit of home/community-based individual service is a) one hour of individual therapy/education with the child/family or b) one hour of travel time to and from the home/community setting.
2. A community-based individual service may be provided in a group setting as defined in this home/community-based individual services section as long as the service is provided specifically for an individual child, not for a group of children.
3. The unit rate for home/community-based individual service is specified in Exhibit C. The rate is \$37.50 per unit; one unit = 1 hours of services. Services for all units billed must be listed on the child's IFSP.
4. A maximum of two service unit of service is allowed for any given service session.

### *B. Center-Based Individual Services*

Center-Based Individual Services are defined as individual therapy/educational services with a single child at the Contractor's center.

1. A unit of center-based individual service is one hour of service provided to an individual child.
2. The unit rate for center-based individual service is specified in Exhibit C (\$25.00/unit). Services for all units billed must be listed on the child's IFSP.

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3. A maximum of one unit of service is allowed for any given service session. Two services units may be reimbursed for co-therapy provided by two therapists for a child, based on the child's IFSP.

### *C. Group Services*

Group services are defined as therapy/educational services provided to more than one child in a group setting. Participants in the groups may all have developmental delays or may be a mixture of children with developmental delays and typical development.

1. A unit of service is one hour of group services.
2. The unit rate for group services is specified in Exhibit C (\$18.00/unit). Services for all units billed must be listed on the child's IFSP.
3. There will be a maximum of two consecutive units of service allowed for any given service session.

### *D. Collaboration*

A unit of collaboration may include, but is not limited to, services as required in preparation for and implementation of the IFSP, or for coordination with other parts of the early childhood service system on behalf of a child, except when those services are provided by a Family Resource Coordinator (FRC).

1. Collaboration units are services provided on behalf of an individual child, but do not meet the above definitions of home/community-based individual services, center-based individual services or group services.
2. A unit of service is one hour of collaboration activities.
3. The unit rate for collaboration is specified in Exhibit C (\$25.00/unit). Services for all units billed must be listed on the child's IFSP.

### *E. Interpreter Services*

Interpreter services provide oral, manual, and/or written interpretation/translation of information between the child and/or parent/caregiver and the therapist/educator.

1. Interpreter services may be reimbursed only when alternate funding sources, including Medicaid and school district funds, are not available.

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2. The unit rate for interpreter services is specified in Exhibit C (\$25.00/unit). Services for all units billed must be listed on the child's IFSP.
- F. All services provided under this contract will be reimbursed on a fee-for-service basis.
- G. All units for center-based individual services, collaboration, group services, and interpretation are to be logged and billed to the nearest 15-minute increment. Individual home and community-based services are to be billed as one unit per visit.
- H. Only one service unit may be billed for a single hour of service for a child (i.e., individual or group service may be billed as appropriate, but not both for the same hour of service).
- I. In addition to the service definitions above, it is up to each agency to assure services are provided in accordance with expectations outlined in your CDS contract with KCDDD, that they follow the child's IFSP, and that each file contains appropriate documentation.

## **II. Eligibility of New Children who are residents of Snohomish County**

- A. Before billing KCDDD for CDS services to a Snohomish County child, contact Nancy Graham at the Region III DDD office (phone: 425-339-3386; fax: 425-339-4856) to confirm that the child is enrolled in the State DD system. (King County is called Region IV and Snohomish County is called Region III DDD in the State DD system.)
- B. If the child is already enrolled in the State DD system, obtain the client case number, funding code and date entered service. Enter all of this information in the appropriate columns on the Client Listing worksheet "CDS\_C\_SC" in the KCDDD Chris excel billing file. Please also enter the child's age in months in the appropriate column.
- C. If the child is enrolled in the State DD system and has been receiving CDS services in King County and is now moving to Snohomish County, the family should notify both Region III DDD and Region IV of the address change and the request to have the child's file transferred to Region III DDD. The agency should confirm that the child's file has been transferred to the Region III DDD and that the State database has been updated prior to billing KCDDD.
- D. If the child is not already enrolled in the State DD system, send a DD State application with eligibility documents to Nancy Graham. Please note

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that, per the State DDD central office, Nancy doesn't back date for the eligibility date. She uses the date on which she receives a completed application packet.

- E. Region III DDD (Heather Hackett-Hayes) will send out the County Service Authorization form to the agency. The Agency should sign the authorization form, return the original form to Region III DDD and fax a copy of the signed form to Snohomish County, 425-388-7216.
- F. When the child is enrolled in the State DDD system, obtain the client case number, funding code and date entered service from Region III DDD. Enter this information as well as the child's age in months in the appropriate columns on the CDS\_SC\_C worksheet in the KCDDD Chris billing excel file.
- G. Note: Part C reimbursements are made directly through contracts with the Snohomish County lead agency (DSHS) and each provider, and require prior approval. Please contact Meg Voedisch at 425-339-4851 in order to discuss serving a Snohomish County Part C eligible child.

### III. Filling out the KCDDD Chris billing file worksheet "CDS\_SC\_C"

The "CDS\_SC\_C" client listing worksheet for children who live in Snohomish County is slightly different from the regular "CDS\_C" client listing worksheet because it matches the Snohomish County CDS reimbursement rates and billing information requirements.

- A. Here are instructions for filling out the new "CDS\_SC\_C" Chris file worksheet:
  - 1. For services to each Snohomish County CDS client that you want to bill to KCDDD, enter one service unit in column "-F-".
  - 2. For each of these clients, in the table on the far right side of the "CDS\_SC\_C" worksheet, enter the appropriate number of service units for each Snohomish County category of service.
  - 3. Fill in the names of any new Snohomish County CDS clients at the end of the list. Please be sure to include the appropriate data in columns "-A-" through "-E-". Repeat steps (1) and (2) for these new clients. If all the required paperwork has been sent to Region III DDD, and is in the process of being processed and you don't yet have a client case number, funding code and date entered service for a Snohomish County client, but you expect to have this information by the 19<sup>th</sup> day of the current month, please make a note of this when you email your Chris file to KCDDD. And as soon

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as you have the client's case number, funding code and date entered service, email that information to KCDDD.

4. If you do not expect to have the required information by the 19<sup>th</sup> of the current month, do not enter the client's name on the "CDS\_SC\_C" worksheet. Continue working with Region III DDD to get the child enrolled in the State DD system. Please remember that for Snohomish County kids, a retro billing can only go back one month. So, for example, in the month of October, you could only go as far back as services provided in August for Retro billings to send in with your regular billing for services provided in September to KCDDD.

#### **IV. How to bill when two agencies are providing CDS services to the same child.**

If two agencies are providing different CDS services to one child according to that child's IFSP, please contact Snohomish County Region III for billing instructions.

#### **Current Snohomish County Region III DDD Contacts**

<b>Snohomish County Eligibility:</b>	<b>Nancy Graham</b> <b>Phone 425-339-1979</b> <b>Fax 425-339-4856</b>
<b>Snohomish County Billing:</b>	<b>Jeannie Christopherson</b> <b>Phone 425-388-7206</b> <b>Fax 425-388-7216</b>
<b>Snohomish County CDS</b>	<b>Meg Strong</b> <b>Phone 425-388-7475</b> <b>Fax 425-388-7216</b>
<b>Snohomish County Part C</b>	<b>Meg Voedisch</b> <b>Phone 425-339-4851</b> <b>Fax 425-339-4856</b>
<b>Sno Co DDD Case Manager</b>	<b>Heather Hackett-Hayes</b> <b>Phone 425-339-4831</b> <b>Fax 425-339-1984</b>